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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

| | |
|------------------------|-------------------|
| Application Number | 10/748,710 |
| Filing Date | December 30, 2003 |
| First Named Inventor | Craig Shapiro |
| Art Unit | 3688 |
| Examiner Name | Raquel Alvarez |
| Attorney Docket Number | 27167-000 |

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 32137

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

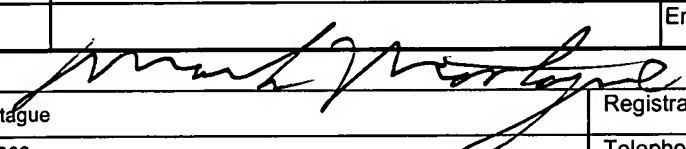
The reasons for this request are: The Petitioner's client has failed to pay one or more bills rendered by the Petitioner for an unreasonable period of time. The below-indicated attorney is one of the attorneys associated with Customer No. 32137, and hereby certifies that a copy of this Request has been supplied to the client, BCD Rewards, LLC., at the below-indicated address. The below-indicated attorney also indicates that he is signing on behalf of all of the attorneys associated with Customer No. 32137. It is submitted that the client would not be prejudiced by the granting of this petition.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

| | | | | | |
|-------------------------------------------------------------|--------------------------------------------------------------------------------------|-------|----|------------------|--------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | BCD Rewards, LLC. | | | | |
| Address | 817 Newcastle Drive | | | | |
| City | St. Louis | State | MO | Zip | 63132 |
| Country | USA | | | | |
| Telephone | | | | Email | |
| Signature |  | | | | |
| Name | Mark Montague | | | Registration No. | 36,612 |
| Date | May 28, 2008 | | | Telephone No. | 212-790-9200 |

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

*A copy of this request is being provided (via 1st class mail & certified mail) to the known address of the Assignee.